



Bib Data Sheet


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SERIAL NUMBER 09/478,144	FILING DATE 01/05/2000 RULE —	CLASS 455	GROUP ART UNIT 2749	ATTORNEY DOCKET NO. P04659
APPLICANTS Christopher M Herring, Longmont, CO ; Dannie G Feekes, Lafayette, CO ; Alexandre Jose C Silva Sonusa, Massama, PORTUGAL;				
** CONTINUING DATA *****				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** ** 02/24/2000				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged	Examiner's Signature _____ Initials _____	STATE OR COUNTRY CO	SHEETS DRAWING 6	TOTAL CLAIMS 20
INDEPENDENT CLAIMS 3				
ADDRESS John L. mAXIN national Semiconductor 801 East Campbell Road Suite 525 Richardson ,TX 75081				
TITLE dECT-Like System and Method of Transceiving Information Over The Industrial -Scientific-Medical Spectrum				
FILING FEE RECEIVED 820	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	



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CONFIRMATION NO. 1299

SERIAL NUMBER 09/478,144	FILING DATE 01/05/2000 RULE	CLASS 455 370	GROUP ART UNIT 2749 2663	ATTORNEY DOCKET NO. P04659	
APPLICANTS Christopher M Herring, Longmont, CO; Dannie G Feekes, Lafayette, CO; Alexandre Jose C Silva Sousa, Massama, PORTUGAL;					
** CONTINUING DATA ***** <i>none SW</i>					
** FOREIGN APPLICATIONS ***** <i>none SW</i>					
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 02/24/2000					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and <i>[Signature]</i> Acknowledged Examiner's Signature Initials		STATE OR COUNTRY CO	SHEETS DRAWING 6	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 3
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